

USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF THE UNITED STATES OF AMERICA	COURT CASE NUMBER 05-26 E
DEFENDANT JO ANN JENKINS	TYPE OF PROCESS WRIT OF EXECUTION/NOTICE

SERVE AT { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
 JO ANN JENKINS
 ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
 689 WASHINGTON STREET, MEADVILLE, PA 16335

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

THE BERNSTEIN LAW FIRM, P.C.
 SUITE 2200 GULF TOWER
 PITTSBURGH, PA 15219
 412-456-8100

Number of process to be
served with this Form 285Number of parties to be
served in this caseCheck for service
on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

SERVE THE ABOVE INDIVIDUAL BY CERTIFIED MAIL, RETURN RECEIPT REQUESTED. IF MAIL IS RETURNED "UNCLAIMED", SERVE PERSONALLY. MUST SERVE BEFORE July 12 2005 WHICH IS 30 DAYS BEFORE SALE. WHEN FILING YOUR RETURN ON THIS FORM 285, PLEASE ATTACH EXTRA COPIES OF DOCUMENTS WHICH WE PROVIDE HEREWITH.

Signature of Attorney other Originator requesting service on behalf of:

☒ PLAINTIFF
☐ DEFENDANT

TELEPHONE NUMBER

412-456-8100

DATE

6-16-05

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process <u>2</u>	District of Origin No. _____	District to Serve No. <u>68</u>	Signature of Authorized USMS Deputy or Clerk	Date
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I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Address (complete only different than shown above)

Date 7/14/05 Time 11:35 ☒ am ☐ pm

Signature of U.S. Marshal or Deputy

Service Fee <u>90.00</u>	Total Mileage Charges including endeavors <u>0.00</u>	Forwarding Fee <u>0.00</u>	Total Charges <u>\$98.00</u>	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
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REMARKS: TO ER E 6-22-05
1-DUSM START 10:45 am END 12:45 am = \$90.00
SEE 285 (HANDBILL) for mileage fees

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED